



Application Specification Sheet

Please fill out and submit your project specifications

Company:

Address:

City:

State:

Zip:

Contact:

Tel:

Fax:

E-Mail:

Application Description:

Fluid Type:

Temp:

C / F

Pressure:

psig

Tank or Contact Materials:

Electrical Device or Output to be controlled:

Voltage:

Power:

Notes and Special Requirements:

Estimated Volume:

Price Target:

SMD Fluid Controls, Inc.
55 Barnes Park Road North
Wallingford CT 06492

Tel: (203)-294-5800

www.Fluidswitch.com
Solutions@Fluidswitch.com
Fax: (203)-265-0544